SUMMER WRESTLING CAMPS @ COLORADO SCHOOL OF MINES
MAIL-IN/WALK-IN REGISTRATION FORM

Day Camp I - June 11, 12, 13
Grades K – 12 Novice & Advanced, Boys & Girls
Half Day $150 (9am-12pm) / Full Day $250 (9am-4pm)
*Pre-Registration Required

Summer League/Team Camp - June 7, 14, 21, 28
Grades 6 – 12 All Skill Levels/Technique/Live Matches
Every Thursday in June 6:00 PM – 8:30 PM
$500 per Team, $75 per Individual, or $25 per Walk-In

Day Camp II - June 18, 19, 20
Grades K – 5 Novice & Advanced, Boys & Girls
Full Day $250 (9am-4pm)
*Pre-Registration Required

Overnight & College ID Camp - June 15, 16, 17
Grades 6 – 12 Experienced Wrestlers & College Prospects
Overnight $270 / Commuter $230
*Pre-Registration Required

*Mail-In Registration must be received 1 week prior to camp start date: Mines Wrestling, 1500 Illinois St. Golden, CO 80401

Select Camp(s): [ ] Day Camp I (Half Day $150) [ ] Day Camp I (Full Day $250) [ ] Day Camp II (Full Day $250)
[ ] College ID Camp (Overnight $270) [ ] College ID Camp (Commuter $230)
[ ] Summer League (Team $500) [ ] Summer League (Individual $75)

Camper’s Name ________________________________ Team __________________ Grass (2018-19) _______ Shirt Size____

Email ________________________________ Phone ________________________________ City __________________ State ___________

Allergies ________________________________ Medication ________________________________

Emergency Contact Name ________________________________ Emergency Contact Phone ________________________________

In consideration of Colorado School of Mines making arrangements for and permitting and assisting Camper to take part in this Camp, the undersigned Camper and Parent or Guardian, if appropriate, agree to hold harmless, release, indemnify and forever discharge Colorado School of Mines, and its Board of Trustees, officers, directors, employees, agents, and any persons acting on their behalf, as well as their heirs, executors and assignees, from and against any and all liability, claims, demands, costs and expenses (including attorneys’ fees) arising out of or in any way connected with any bodily injury or property damage in any way relating to or arising out of Camper’s participation in the Camp, even if the liability, claims, demands, costs and expenses may arise, in whole or in part, out of the negligence or carelessness of the persons or entities mentioned above. The Camper and Parent or Guardian are aware that the Camp may include certain risks and dangers. The Camper and Parent or Guardian understand that specific risks vary depending on the level and nature of the Camp, and can range from minor personal injuries such as scratches, bruises, and sprains to major injuries such as eye injuries and back or joint injuries, to catastrophic injuries resulting in paralysis or death. By signing this waiver, the Parent or Guardian is consenting to Camper’s participation in the Camp and acknowledges that he/she understands that any and all risk, whether known or unknown, is expressly assumed by Parent or Guardian and all claims, whether known or unknown, are expressly waived in advance. To the best of their knowledge, the Camper and Parent or Guardian are not aware of any mental or physical disability or health-related reasons or problems that would hinder or otherwise prevent Camper from safely participating in the Camp. Camper and Parent or Guardian understand that they are solely responsible for any costs arising out of any bodily injury or property damage sustained through or arising from Camper’s involvement in the Camp. Further, the Parent or Guardian is responsible for all of Camper’s medical expenses. By signing this waiver, the Parent or Guardian gives permission is cases of Camper’s injury or illness to render emergency first aid and to make any necessary referral for treatment. Camper’s Parent or Guardian expressly agrees that this Liability Waiver Form is intended to be as broad and inclusive as permitted by the laws of the State of Colorado, and that if any portion herein is held to be invalid or unenforceable, the balance shall continue in full legal force and effect. Camper’s Parent or Guardian has carefully read this Liability Waiver Form, understand the contents herein, and is executing it voluntarily of his/her own free will. Camper’s Parent or Guardian has had sufficient time to review and seek explanation of the provisions above, has carefully read them, understands them fully and agrees to be bound by them. Nothing in this waiver shall be construed to waive, limit, or otherwise modify any governmental immunity available to any of the persons or entities released herein under the Colorado Governmental Immunity Act, §24-10-101, et seq., C.R.S.

Name of Camper (please print) ________________________________ Camper’s Health Insurance ________________________________

Name of Parent or Guardian (please print) ________________________________ Insurance I.D. # ________________________________

Signature of Camper’s Parent or Guardian ________________________________ Date ________________________________